

## ISDH HSP Universal Services Service Standard

The Universal Standards listed below are applicable to all service categories funded under the Ryan White Part B program. These standards are compliant with the HRSA/HAB monitoring standards issued December 2013. Recipients are required by HRSA/HAB to adhere to these monitoring standards and as such, sub-recipients funded by the HIV Services Program (HSP).

Standard	Documentation
<b>1. Access to Care</b>	
<ol style="list-style-type: none"> <li>1. Services must be provided irrespective of age, physical or mental challenges, creed, criminal history, history of substance abuse, immigration status, marital status, national origin, race, religion, sexual orientation, gender identity and expression, socioeconomic status, or current/past health conditions</li> <li>2. Services must be provided in accordance with the American with Disability Act Guidelines. For information, refer to ADA Guidelines</li> <li>3. Sub-recipients must have written instructions for clients on how to access sub-recipients services</li> </ol>	<ol style="list-style-type: none"> <li>1. Policies and procedures and client grievances</li> <li>2. Policies and procedures</li> <li>3. Policies and procedures and informational flyers and handouts</li> </ol>
<b>2. Client Access</b>	
<ol style="list-style-type: none"> <li>1. Sub-recipients must inform clients of the various HIV services and resources available throughout your region</li> <li>2. Sub-recipients must have a resource referral and tracking system with identified HIV and other service sub-recipients</li> </ol>	<ol style="list-style-type: none"> <li>1. Informational flyers, handouts, resource manuals, literature. Documentation in clients records of resource given</li> <li>2. Referral tracking system for each service category</li> </ol>
<b>3. Staff Requirements</b>	
<ol style="list-style-type: none"> <li>1. Sub-recipients must have written personnel policies and procedures</li> <li>2. Sub-recipients must offer staff and contracted service sub-recipients job descriptions that address minimum qualifications, core competencies, and job responsibilities</li> <li>3. Sub-recipients must ensure that services are provided in a culturally-competent, compassionate, non-judgmental, and comprehensible manner</li> <li>4. Sub-recipient must ensure that staff and contracted service sub-recipients delivering direct services to clients must have knowledge of the following: <ul style="list-style-type: none"> <li>• HIV/AIDS</li> <li>• Effects of HIV/AIDS-related</li> </ul> </li> </ol>	<ol style="list-style-type: none"> <li>1. Policies and procedures</li> <li>2. Position descriptions</li> <li>3. Training/in-service certificates/sign-in sheets, staff interview, client satisfaction survey and consumer grievances</li> <li>4. Documentation of knowledge via formal education, trainings, or other methods. Types of documentation may include, but is not limited to medical degree, license/certification, training certificate, transcripts, staff interview</li> </ol>

<p>illnesses and comorbidities on consumers</p> <ul style="list-style-type: none"> <li>• Psychosocial effects of HIV/AIDS on clients and their families/significant others</li> <li>• Current strategies for the management of HIV/AIDS</li> <li>• HIV-related resources and services in IN</li> </ul> <p>For more information, refer to DHHS Guidelines</p> <ol style="list-style-type: none"> <li>5. Sub-recipient must ensure that professional staff and contracted service sub-recipients follow, at minimum, established codes of conduct for their discipline</li> <li>6. Sub-recipient must ensure that staff and contracted service sub-recipients receive ongoing supervision that is relevant and appropriate to their professional needs</li> <li>7. Sub-recipient must ensure that staff and contracted service providers conduct business in a manner that ensures the confidentiality of clients and follows established protocols outlined in the Health Insurance Portability and Accountability Act (HIPAA) and the IN Public Health Code</li> </ol>	
<b>4. Safety and Emergency Procedures</b>	
<ol style="list-style-type: none"> <li>1. Sub-recipient must ensure that services are provided in facilities that are clean, comfortable, and free from hazards</li> <li>2. Sub-recipient must have policies and procedures for the following: <ul style="list-style-type: none"> <li>• Emergency Procedures that include, fire, severe weather, and intruder/weapon threat</li> <li>• Medical/Health Care Crisis</li> <li>• Infection Control and Transmission Risk</li> <li>• Crisis Management</li> <li>• Accident/Incident Reporting</li> <li>• Continuation of Operations Plan (COOP)</li> </ul> </li> </ol> <p>Sub-recipient must ensure that staff and contracted service sub-recipients are trained and follow the safety and emergency procedures</p>	<ol style="list-style-type: none"> <li>1. Site visit observation</li> <li>2. Policies and procedures, site visit observation, training certificates and/or sign-in sheets, staff interview</li> </ol>

<b>5. Eligibility</b>	
<ol style="list-style-type: none"> <li>1. Subrecipients must have established criteria for the provision of services that includes, at minimum:               <ol style="list-style-type: none"> <li>a. Eligibility verification consistent with recipient requirements:                   <ul style="list-style-type: none"> <li>- Maintaining legal Indiana residency;</li> <li>- Proof of HIV status</li> <li>- Verifying Medicaid status</li> <li>- Confirming Federal Income Levels are under 300% per household size; and</li> </ul> </li> <li>b. Acknowledgement of payer of last resort checklist</li> <li>c. Processes for applying clients for all eligible Ryan White parts available.</li> </ol> </li> </ol>	<ol style="list-style-type: none"> <li>1. Non-medical case managers must maintain up to date eligibility records for clients according to agency protocol and in any data system required by ISDH.</li> <li>2. Service providers and sub-recipients must maintain documentation of current eligibility if providing HIV services reimbursable under the RWHAP Part B Program.               <ul style="list-style-type: none"> <li>• Acceptable documentation includes a current eligibility approval letter dated within 6 months of service provision. These letters may be accessed from the client's Non-medical case management, and includes effective and end dates of eligibility and those services for which the client may enroll.</li> </ul> </li> <li>3. Documentation must be made available for review by ISDH upon request.</li> </ol>
<b>6. Confidentiality Related Documentation</b>	
<ol style="list-style-type: none"> <li>1. Sub-recipient must have a signed client's informed consent for provision of Ryan White Services. Time limit must not exceed 12 months</li> <li>2. Sub-recipient must have a written statement outlining consumer rights that, at minimum, includes:               <ul style="list-style-type: none"> <li>• Nature of services offered</li> <li>• The ability to terminate service at any time</li> <li>• Transfer and discharge procedures</li> <li>• Client progress review</li> <li>• Access to client records</li> </ul> </li> <li>3. Sub-recipients must have a written statement outlining client responsibilities that, at minimum, includes:               <ul style="list-style-type: none"> <li>• Scheduling, rescheduling, and canceling appointments</li> <li>• Drug and alcohol use on premises</li> <li>• Weapons on premises</li> <li>• Acts of abuse towards staff, property or services</li> </ul> </li> <li>4. Sub-recipient must have an objective process to address and track clients' grievances</li> <li>5. Sub-recipient must have policies and procedures to ensure that clients' medical records and other personal health</li> </ol>	<ol style="list-style-type: none"> <li>1. Consent form, documentation in client records of signed and updated Consent Form before third party disclosures are made</li> <li>2. Documentation of signed and dated Clients Rights and Responsibilities</li> <li>3. Documentation of signed and dated Clients Rights and Responsibilities</li> <li>4. Policies and procedures, documentation of signed and dated grievance policy, and resolution of grievance</li> <li>5. Policies and procedures, staff interview, site visit observation</li> </ol>

<p>information are:</p> <ul style="list-style-type: none"> <li>• Securely faxed, emailed or phoned Safely transported during the courses of conducting business</li> <li>• Securely stored electronically with limited access</li> <li>• Shared with third parties in accordance with HIPAA</li> <li>• Sub-recipients must ensure that client's records are maintained in a secure location</li> </ul> <p>6. Sub-recipients must assure that when a client or the client's legal guardian signs and initials a Release to obtain and disclose information, the client/legal guardian understands that information from the client's record will be shared and with whom and for what purpose</p>	
<p><b>7. Client Satisfaction</b></p>	
<p>1. Sub-recipient must establish evaluation methods to assess client satisfaction and receive feedback on services using any of the following methods:</p> <ul style="list-style-type: none"> <li>• Client satisfaction survey</li> <li>• Suggestion box or other client input mechanism</li> <li>• Focus groups and/or public meetings</li> </ul> <p>2. Sub-recipients must use results from evaluation methods to improve service delivery</p>	<p>1. Quality Committee meeting notes/minutes, client satisfaction survey/results, visual verification of suggestion box or other client input mechanisms during site visit, notes or reports from focus groups and/or public meetings</p> <p>2. Quality Improvement Plan, modification to service delivery policies and procedures based on feedback, inclusion of client feedback in internal training/staff communications</p>